

**N. J. DIVISION OF HIGHWAY TRAFFIC SAFETY
140 EAST FRONT STREET, 7TH FLOOR
P.O. BOX 048, TRENTON, NJ 08625-0048
(609) 633-9300 FAX (609) 633-9020**

You Drink and Drive, You Lose 2004 Holiday Enforcement Project

November 22, 2004 - January 2, 2005

REPORTING FORM

Please provide data on the following impaired driving-related enforcement activity during the mobilization period: November 22, 2004-January 2, 2005

Police Department: _____ County: _____

Summonses issued by category:

DWI Arrests: _____

Speeding: _____

Refusal to Submit : _____

Seat Belt: _____

Breath Test Only: _____

Child Restraint: _____

Open Container : _____

Equipment: _____

Traffic Signal: _____

Other Moving: _____

Other Non-Moving: _____

OTHER ACTIVITY RESULTING FROM MV STOPS: (Arrests, etc.): _____

News release sent: _____ Municipal resolution approved: _____

Report prepared by: _____ Phone #: _____

Please fax or mail the completed form to the address above:

NJ Division of Highway Traffic Safety

Attn: Region Supervisor

(Revised 10/04)